BEVERLY HEALTH REHABILITATION CTR-SUPERIOR

1612 NORTH 37TH STREET

SUPERIOR	54880	Phone: (715) 392-5144		Ownership:	Corporation
Operated from	1/1 To 12/31	Days of Operation:	365	Highest Level License:	Skilled
Operate in Conj	junction with 1	Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds	Set Up and Sta	affed (12/31/05):	82	Title 18 (Medicare) Certified?	Yes
Total Licensed	Bed Capacity	(12/31/05):	90	Title 19 (Medicaid) Certified?	Yes
Number of Pecic	lents on 12/31	/05:	77	Average Daily Cengus:	79

Age, Gender, and Primary Diagnosis	Length of Stay (12/31/05)							
Primary Diagnosis	%	 Age Groups 	*	Less Than 1 Year 1 - 4 Years				
Developmental Disabilities	0.0	Under 65	13.0	More Than 4 Years	16.9			
Mental Illness (Org./Psy)	45.5	65 - 74	13.0	İ				
Mental Illness (Other)	2.6	75 - 84	27.3	İ	100.0			
Alcohol & Other Drug Abuse	1.3	85 - 94	37.7					
Para-, Quadra-, Hemiplegic	2.6	95 & Over	9.1	Full-Time Equivalent				
Cancer	1.3	İ		Nursing Staff per 100 Residents				
Fractures	3.9		100.0	(12/31/05)				
Cardiovascular	14.3	65 & Over	87.0					
Cerebrovascular	10.4			RNs	12.3			
Diabetes	5.2	Gender	%	LPNs	9.3			
Respiratory	2.6			Nursing Assistants,				
Other Medical Conditions	10.4	Male	18.2	Aides, & Orderlies	36.0			
		Female	81.8					
	100.0							
			100.0					

Method of Reimbursement

		Medicare 'itle 18			edicaid itle 19			Other			Private Pay	2		amily Care]	Managed Care			
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	
Int. Skilled Care	0	0.0	0	3	6.7	132	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	3.9
Skilled Care	14	100.0	394	41	91.1	114	3	100.0	125	11	100.0	169	0	0.0	0	4	100.0	325	73	94.8
Intermediate				1	2.2	96	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.3
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	14	100.0		45	100.0		3	100.0		11	100.0		0	0.0		4	100.0		77	100.0

BEVERLY HEALTH REHABILITATION CTR-SUPERIOR

Admissions, Discharges, and Deaths During Reporting Period						d Activities as of 12/	
					% Needing		Total
Percent Admissions from:		Activities of	8	As	sistance of	% Totally	Number of
Private Home/No Home Health	6.8	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	3.4	Bathing	3.9		54.5	41.6	77
Other Nursing Homes	2.7	Dressing	18.2		74.0	7.8	77
Acute Care Hospitals	85.0	Transferring	13.0		75.3	11.7	77
Psych. HospMR/DD Facilities	0.0	Toilet Use	10.4		76.6	13.0	77
Rehabilitation Hospitals	0.7	Eating	36.4		55.8	7.8	77
Other Locations	1.4	*******	******	*****	* * * * * * * * * * * * * * * * * *	*******	******
Total Number of Admissions	147	Continence		용	Special Treatmen	ts	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	5.2	Receiving Resp	iratory Care	16.9
Private Home/No Home Health	39.7	Occ/Freq. Incontiner	nt of Bladder	50.6	Receiving Trac	heostomy Care	2.6
Private Home/With Home Health	19.2	Occ/Freq. Incontiner	nt of Bowel	40.3	Receiving Suct	ioning	1.3
Other Nursing Homes	2.0	İ			Receiving Osto	my Care	3.9
Acute Care Hospitals	9.9	Mobility			Receiving Tube	Feeding	1.3
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	0.0	Receiving Mech	anically Altered Diets	11.7
Rehabilitation Hospitals	0.0	<u> </u>					
Other Locations	0.7	Skin Care			Other Resident C	haracteristics	
Deaths	23.8	With Pressure Sores		3.9	Have Advance D	irectives	100.0
Total Number of Discharges		With Rashes		5.2	Medications		
(Including Deaths)	151	İ			Receiving Psyc	hoactive Drugs	19.5

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

		Own	Ownership:		Size:	Lic	ensure:				
	This	Proprietary		50	-99	Ski	lled	Al	1		
	Facility	Peer	Peer Group % Ratio		Peer Group		Peer Group		lities		
	%	%			% Ratio		Ratio	%	Ratio		
Occupancy Rate: Average Daily Census/Licensed Beds	87.8	85.8	1.02	86.3	1.02	88.8	0.99	88.1	1.00		
Current Residents from In-County	81.8	81.3	1.01	80.0	1.02	83.2	0.98	77.6	1.05		
Admissions from In-County, Still Residing	19.0	16.8	1.14	18.8	1.01	18.7	1.02	18.1	1.05		
Admissions/Average Daily Census	186.1	216.2	0.86	180.5	1.03	177.7	1.05	162.3	1.15		
Discharges/Average Daily Census	191.1	217.8	0.88	178.7	1.07	179.2	1.07	165.1	1.16		
Discharges To Private Residence/Average Daily Census	112.7	100.9	1.12	87.1	1.29	83.4	1.35	74.8	1.51		
Residents Receiving Skilled Care	98.7	97.2	1.02	96.4	1.02	96.3	1.02	92.1	1.07		
Residents Aged 65 and Older	87.0	91.5	0.95	93.5	0.93	91.3	0.95	88.4	0.98		
Title 19 (Medicaid) Funded Residents	58.4	61.7	0.95	59.0	0.99	61.8	0.95	65.3	0.89		
Private Pay Funded Residents	14.3	19.4	0.73	24.5	0.58	22.5	0.64	20.2	0.71		
Developmentally Disabled Residents	0.0	0.9	0.00	0.8	0.00	1.1	0.00	5.0	0.00		
Mentally Ill Residents	48.1	28.9	1.66	31.6	1.52	34.8	1.38	32.9	1.46		
General Medical Service Residents	10.4	23.7	0.44	26.1	0.40	23.0	0.45	22.8	0.46		
Impaired ADL (Mean)	50.4	47.9	1.05	47.8	1.06	48.4	1.04	49.2	1.02		
Psychological Problems	19.5	59.1	0.33	57.6	0.34	59.5	0.33	58.5	0.33		
Nursing Care Required (Mean)	5.8	7.1	0.83	7.0	0.84	7.2	0.81	7.4	0.79		